

church
UNITY OF PORTLAND



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

1. Application. **Do not include** any OLCC fees with your application packet (the license fee will be collected at a later time). Application is being made for:

License Applied For:	CITY AND COUNTY USE ONLY
<input type="checkbox"/> Brewery 1 st Location	Date application received: _____
<input type="checkbox"/> Brewery 2 nd Location	Name of City or County: _____
<input type="checkbox"/> Brewery 3 rd Location	Recommends this license be: <input type="checkbox"/> Granted <input type="checkbox"/> Denied
<input type="checkbox"/> Brewery-Public House 1 st location	By: _____
<input type="checkbox"/> Brewery-Public House 2 nd location	Date: _____
<input type="checkbox"/> Brewery-Public House 3 rd location	
<input type="checkbox"/> Distillery	
<input type="checkbox"/> Full On-Premises, Commercial	
<input type="checkbox"/> Full On-Premises, Caterer	
<input type="checkbox"/> Full On-Premises, Passenger Carrier	
<input type="checkbox"/> Full On-Premises, Other Public Location	
<input type="checkbox"/> Full On-Premises, For Profit Private Club	
<input type="checkbox"/> Full On-Premises, Nonprofit Private Club	
<input type="checkbox"/> Grower Sales Privilege 1 st location	
<input type="checkbox"/> Grower Sales Privilege 2 nd location	
<input type="checkbox"/> Grower Sales Privilege 3 rd location	
<input checked="" type="checkbox"/> Limited On-Premises	OLCC USE ONLY
<input checked="" type="checkbox"/> Off-Premises	Date application received: <u>3/7/19</u>
<input type="checkbox"/> Off-Premises with Fuel Pumps	By: <u>Jan Z.</u>
<input type="checkbox"/> Warehouse	Date application accepted as initially complete: <u>3/7/19</u>
<input type="checkbox"/> Wholesale Malt Beverage & Wine	By: <u>Jan Z.</u>
<input type="checkbox"/> Winery 1 st Location	License Action(s): <u>N/O</u>
<input type="checkbox"/> Winery 2 nd Location	
<input type="checkbox"/> Winery 3 rd Location	

Rec'd by Portland
 Liquor Licenses
 MAR 12 2019
 PD \$100 - dk
 26336

2. Identify the applicant(s) applying for the license(s). ENTITY (example: corporation or LLC) or INDIVIDUAL(S) applying for the license(s):

(Applicant #1) UNITY OF PORTLAND, Lisa Davis, Senior Minister
 (Applicant #2) _____
 (Applicant #3) Rev. Lisa M. Davis 3-6-19
 (Applicant #4) _____

OLCC USE ONLY	OLCC FINANCIAL SERVICES USE ONLY

OLCC Application 3/7/19



OREGON LIQUOR CONTROL COMMISSION

LIQUOR LICENSE APPLICATION

3. Applicant #1 <i>CHURCH Unity of PORTLAND</i>		Applicant #2	
Applicant #3		Applicant #4	
4. Trade Name of the Business (Name Customers Will See)			
5. Business Address (Number and Street Address of the Location that will have the liquor license) <i>4525 SE STARK</i>			
City <i>PORTLAND</i>	County <i>MULTNOMATH</i>	Zip Code <i>97215</i>	
6. Does the business address currently have an OLCC liquor license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
7. Does the business address currently have an OLCC marijuana license? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
8. Mailing Address/PO Box, Number, Street, Rural Route (where the OLCC will send your mail) <i>SAA</i>			
City	State	Zip Code	
9. Phone Number of the Business Location <i>(503) 234-7441</i>		Email Contact for this Application	
Contact Person for this Application <i>KNUT EIE</i>		Phone Number <i>(503) 880-6289</i>	
Mailing Address <i>4525 SE STARK</i>	City <i>PORTLAND</i>	State <i>OR</i>	Zip Code <i>97215</i>

I understand that marijuana (such as use, consumption, ingestion, inhalation, samples, give-away, sale, etc.) is **prohibited** on the licensed premises.

I attest that all answers on all forms, documents, and information provided to the OLCC are true and complete.

Applicant Signature(s)

- Each individual person listed as an applicant must sign the application.
- If an applicant is an entity, such as a corporation or LLC, at least one person who is authorized to sign for the entity must sign the application.
- A person with the authority to sign on behalf of the applicant (such as the applicant's attorney or a person with power of attorney) may sign the application. If a person other than an applicant signs the application, please provide proof of signature authority.

CHURCH
UNITY OF PORTLAND, LISA DAVIS, SENIOR MINISTER

(Applicant #1)

(Applicant #2)

Rev. Lisa M. Davis 3-6-19

(Applicant #3)

(Applicant #4)



OREGON LIQUOR CONTROL COMMISSION
BUSINESS INFORMATION

Please Print or Type

Applicant Name: CHURCH UNITY OF PORTLAND Phone: (503) 234-7441
Trade Name (dba): LISA DAVIS, SENIOR MINISTER
Business Location Address: 4525 SE STARK
City: PORTLAND, OR ZIP Code: 97215

DAYS AND HOURS OF OPERATION

VARIABLE SPECIAL EVENT HOURS

Business Hours:

Sunday 9 to 3
Monday 9 to
Tuesday
Wednesday
Thursday
Friday
Saturday

Outdoor Area Hours:

Sunday to
Monday to
Tuesday to
Wednesday to
Thursday to
Friday to
Saturday to

The outdoor area is used for:

- Food service
Alcohol service
Enclosed, how

The exterior area is adequately viewed and/or supervised by Service Permittees.

(Investigator's Initials)

Seasonal Variations: Yes No If yes, explain:

VARIABLE SPECIAL EVENT HOURS

ENTERTAINMENT

Check all that apply:

- Live Music
Recorded Music
DJ Music
Dancing
Nude Entertainers
Karaoke
Coin-operated Games
Video Lottery Machines
Social Gaming
Pool Tables

Other: SPIRITUAL, BLUES, JAZZ, CLASSICAL

DAYS & HOURS OF LIVE OR DJ MUSIC

Sunday to
Monday to
Tuesday to
Wednesday to
Thursday to
Friday to
Saturday to

SEATING COUNT

Restaurant: 140 Outdoor: 30
Lounge: NA Other (explain):
Banquet: Total Seating: 170

OLCC USE ONLY

Investigator Verified Seating: (Y) (N)
Investigator Initials:
Date:

I understand if my answers are not true and complete, the OLCC may deny my license application.

Applicant Signature: Rev. Lisa M. Davis Date: 3-6-19

1-800-452-OLCC (6522)

www.oregon.gov/olcc

(rev. 12/07)



OREGON LIQUOR CONTROL COMMISSION
LIMITED PARTNERSHIP QUESTIONNAIRE

SOS:03817A-18

Please Print or Type

Partnership Name: CHURCH UNITY OF PORTLAND Year Filed: 1935

Trade Name (dba): _____

Business Location Address: 4525 SE STARK

City: PORTLAND, OR ZIP Code: 97215

List Partners:

Indicate if General Partner or Limited Partner:

1. NOTE: NON PROFIT RELIGIOUS ORGANIZATION / CORPORATION
2. LISA DAVIS, SENIOR MINISTER
3. AMY DRISCOLL, CHAIR, BOARD OF TRUSTEES.
4. CHARLOTTE DIXON, SECRETARY, BOARD OF TRUSTEES.
5. _____
6. _____

(Note: If any partner is another legal entity, that entity must also complete an LLC, Limited Partnership or Corporation Questionnaire.)

Server Education Designee: _____ DOB: _____

I understand that if my answers are not true and complete, the OLCC may deny my license application.

Partner Signature: Rev. Lisa M Davis Sr. Minister Date: 3-6-19
(name) (title)

CITY OF PORTLAND LIQUOR OUTLET INFORMATION FORM

PLEASE SUBMIT TO: Liquor Licensing Notification Program, 1221 SW 4th Avenue, Suite #110, Portland OR 97204

On New Outlet applications, property owners within 300 feet of the location, the Portland Police Bureau and all interested parties are notified by mail (with a copy of this form) and given an opportunity to comment on your application. The OLCC allows the City at least 45 days to complete the recommendation process. Submission of a complete operating plan can expedite the time required to process. A City liquor endorsement is not a confirmation that the property is properly zoned. Call (503) - 823-7526 to confirm that the property is properly zoned.

On submission of this form, you must also include the following:

- OLCC Liquor Application Form, initialed by your OLCC License Investigator
- OLCC Individual History Forms (all persons anticipated to have a financial interest, or key personnel are required)
- City Endorsement Fees

City Endorsement Fees are payable at the beginning of the application process (please make checks payable to City of Portland): New outlets are \$100.00, all others are \$75.00. All blank sections must be filled in. If the question does not apply, write "N/A" in the space.

LEGAL NAME OF BUSINESS: Unity Church of Portland

DBA OR TRADE NAME: SAA PHONE: 503-234-7441 FAX: 503-234-7443

BUSINESS ADDRESS (Including ZIP Code): 4525 SE STARK, Portland, OR 97215

WHAT TYPE OF LIQUOR ARE YOU APPLYING FOR? (Change of owner, new outlet, beer & wine, etc.): New OUTLET - Wine & Beer

CONTACT PERSON: Knut Eie PHONE: (503) 880-6289 EMAIL: Knut.Solutions@gmail.com

DESCRIPTION OF OUTLET

TYPE OF OPERATION (CHECK ALL THAT APPLY)

- | | |
|--|---|
| <input type="checkbox"/> Food Cart | <input type="checkbox"/> Night Club |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Sports Bar |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Other: <u>CHURCH</u> |

SIZE OF SERVICE AREA: inside 65' x 72'

EXISTING BUILDING: Yes No

ZONING: R5

STRUCTURAL CHANGES (DESCRIBE): NONE

RESTAURANT SEATING CAPACITY: 140 LOUNGE SEATING CAPACITY: N/A OUTSIDE SEATING CAPACITY: 30

DESCRIBE SECURITY: Building host and multiple greeters

HAS AN APPLICATION FOR A LIQUOR LICENSE AT THIS LOCATION BEEN RECEIVED BY THE CITY OF PORTLAND IN THE LAST TWO (2) YEARS?
 Yes No I Don't Know

HOURS OF OPERATION

SUNDAY - THURSDAY OPEN: VARIABLE - special events only! CLOSE: _____ FRIDAY & SATURDAY OPEN: _____ CLOSE: _____

HOW LATE WILL THERE BE OUTSIDE SEATING? 10pm HOW LATE WILL THERE BE ENTERTAINMENT? 10pm

HISTORY OF LOCATION

PREVIOUS BUSINESS NAME OF THIS LOCATION: Unity of Portland, Unity Center, Inc

NAME & ADDRESS OF PROPERTY OWNER: Unity Church of Portland, 4525 SE STARK, PORTLAND, OR 97215

ENTERTAINMENT

TYPE OF ENTERTAINMENT (CHECK ALL THAT APPLY)

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Video Poker | <input checked="" type="checkbox"/> Live Music | <input type="checkbox"/> Nude Dancers |
| <input type="checkbox"/> Karaoke | <input type="checkbox"/> Video Games/Pinball | <input type="checkbox"/> Recorded Music | <input type="checkbox"/> DJ Entertainment |
| <input type="checkbox"/> Pool Tables (How Many): _____ | <input type="checkbox"/> Events (Describe): <u>Gospel, Blues, classical, spiritual, blues, jazz, classical</u> | <input type="checkbox"/> Other: <u>concerts</u> | |

The City requires an Amusement Location Permit for all locations with amusement devices or pool tables. Contact the Revenue Bureau for rules and an Amusement Location Permit application form now. Permits are non-transferable from one owner to another and must be paid before games are placed on the premises. Contact Anne Holm at 503-865-2488. The City of Portland will notify affected nearby neighbors and a copy of this form will be included in our mailing.

Use this area to provide any additional information that you wish to be considered on this liquor application
Non-profit religious corporation. off-street parking for all patrons.

A false answer or omission of any requested information may result in an unfavorable City recommendation.

SIGNATURE: X Rev. Gisa M. Davis DATE: 3/10/19



City of Portland, Oregon - Bureau of Development Services

1900 SW Fourth Avenue • Portland, Oregon 97201 | 503-823-7300 | www.portlandoregon.gov/bds



ZONING VERIFICATION

Address: 4525 SE STARK ST

R#: R111533

State ID: 1N2E31CC 2100

Zone: R5

Plan District:

Proposed Use: OTHER

OTHER is an ALLOWED use in the R5 zone

Additional Comments:

Approval for alcohol to be provided at church-sponsored events (e.g. weddings, performances, etc.). The church itself is an approved Conditional Use in the R5 residential zone.

Andy Gulizia

Name of City Official

City Planner

Title

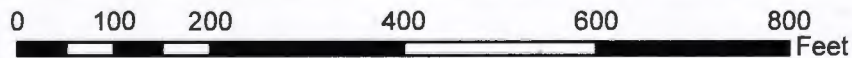
503-984-1014

Contact Number

Signature of Official

3 / 11 / 2019

Date



1 inch = 200 feet

